

Question Number	Question	Response
FAQ 1	How long can I submit FAQ questions and when will they be posted?	The HPC will accept questions through the FAQ submission deadline of March 23, 2018, with the final FAQ posting approximately one week later. Questions submitted through the FAQ process will be answered on a rolling basis with HPC staff posting answers on an approximately weekly basis.
Budgeting 1	Are fringe or indirect costs allowed as reimbursable elements of the budget?	No. Indirect and Fringe expenses are not eligible for reimbursement by the HPC in this program and they are not in the Budget.
Budgeting 2	In what ways can the 25% match be achieved?	<p>SHIFT-Care is structured as a reimbursement contract. For every expense listed in the approved budget, Awardees will pay the full expense. On a periodic basis, provided that the Awardee demonstrates that it has paid the requested amount(s), submitted all Deliverables, and met all other Program requirements, the HPC will reimburse the Awardee 75% of the requested amount. The Awardee is responsible for the remaining 25%.</p> <p>As an example, if a community health worker is included in the budget, the Awardee will pay his or her full salary or wages, and on a periodic basis, will demonstrate proof of that payment to the HPC. The HPC would then reimburse 75% of the requested salary/wage amount, with the Awardee responsible for the remaining 25%.</p> <p>Please note that this FAQ response has been simplified for illustrative purposes, and does not supersede the details provided in the SHIFT-Care Challenge Terms &amp; Conditions. Please refer to the SHIFT-Care Challenge Terms and Conditions for additional details about the reimbursement process and requirements.</p>
Budgeting 3	Will there be a cap on money for purchase of technology?	There is no cap on technology expenses. The total Award may not exceed \$750,000.
Eligibility 1	Are BHCPs considered ACO participants for the purpose of being an eligible entity?	Yes, if the Behavioral Health Community Partner meets the definition of ACO Participant in Section III of the RFP.
Eligibility 2	Can large behavioral health organizations that are certified ACOs be considered applicants or is this role restricted to the CHART eligible hospitals? In other words can a hospital be a partner rather than the applicant?	Any Provider or Provider Organization may be an Applicant on a Proposal, as defined in Section III of the RFP. A hospital may be a Partner instead of the Applicant as long as it meets the definition of Partner as stated in Section III of the RFP.
Eligibility 3	For track 2b, are applicants restricted to Hospitals with EDs?	Yes, an Applicant for Track 2b must be a hospital with an Emergency Department.
Eligibility 4	Can a government (agency local or state) serve as a partner?	A government agency may serve as a Partner if it meets the definition of Partner in Section III of the RFP.
Eligibility 5	Could an application be submitted by a payer partnering with a provider organization?	Payers are not eligible Applicants (see Section III of the RFP for definition of Eligible Entity).
Eligibility 6	Would ACO entities be considered separate applicant organizations from their affiliated hospital organizations?	Yes, ACOs and affiliated hospitals may be considered separate Applicants as long as they both meet the definition of Applicant as stated in the RFP (Section III).
Eligibility 7	Are current HPC grantees eligible to apply for the SHIFT-Care Challenge?	Yes, recipients of current and past HPC funding opportunities are eligible to apply as long as they are eligible Applicants (see Section III of the RFP for definition of Eligible Entity).

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Evaluation 1	Can you share any specifics (such as criteria, scope, and depth) you are seeking for the evaluation of the intervention?	The HPC seeks an evaluation plan that builds the evidence base for the proposed care delivery model. An evaluation plan must be designed to determine the Initiative's performance on its primary aim and intermediate results, compared to a baseline or a comparison group. The baseline or comparison group should be thoughtfully constructed to minimize threats to validity of the conclusions. Applicants are welcome to include additional relevant elements, such as patient experience, or implementation evaluation, in the evaluation plan. The HPC has no specific requirement for methods. Applicants are required to explain why the proposed methods are appropriate (See Applicant Initiative Response Template (AIR) question 3).
Evaluation 2	Are there any requirements about who is eligible to perform the evaluation (i.e. could graduate students perform it or does it have to be an outside evaluator?)	The HPC does not have specific requirements for who may perform the evaluation. However, the qualifications and experience of the individuals designing and overseeing the evaluation will be considered during review and selection, as part of the assessment of the strength and feasibility of the proposed evaluation design (see RFP p. 12).
Evaluation 3	Can grantees spend award dollars to fund the evaluation?	Yes
Selection Criteria 1	The RFP states that in determining awards, preference will be given to HPC-certified ACOs (including provisionally certified ACOs), ACO Participants, and CHART-eligible hospitals. Does this mean that in order to receive such preference an entity must be both part of an HPC-certified ACO and be CHART-eligible?	Preference will be given to an entity meeting one or more of the following criteria: the entity is an HPC-certified ACO (or a provisionally-certified ACO), the entity is an ACO Participant, and/or the entity is a CHART-eligible hospital. An Applicant does not have to be both an ACO/ACO Participant and a CHART-eligible hospital for this selection preference.
Selection Criteria 2	Is there a preference for the lead organization to be a hospital or community based organization?	The Applicant must be an Eligible Entity as defined in Section III of the RFP
Selection Criteria 3	Is the intent to fund programs in every county across the state?	The HPC will evaluate all Proposals that meet the minimum requirements described in Section VI of the RFP, in accordance with the selection criteria detailed in Section V of the RFP.
Target Population 1	Can the funding be used to expand DSRIP funded programs to serve non-Mass health ACO members?	Yes.
Target Population 2	Can you describe the target population in more detail? Who's eligible, who's not? Can they be uninsured, undocumented, incarcerated, etc? Please also clarify the exclusion of CP enrollees--aren't they all eligible for flexible funds? Are ACO enrollees that are not CP enrollees eligible?	Track 1 target population exclusions: The Behavioral Health (BH) and Long Term Services and Supports (LTSS) Community Partner (CP) population; the Community Partner population needs to be excluded from the Applicant's target population because they are eligible for flexible services as part of DSRIP. Track 2a target population exclusions: all MassHealth ACO and Community Partner populations.
Target Population 3	Could you confirm whether or not applicants can propose populations with SUD that do not have SMI. If you need further clarification on this question, please let me know.	Yes, a Proposal's target population may include patients with Substance Use Disorder (SUD), Serious Mental Illness (SMI), co-occurring SUD and SMI, etc., as long as the patients for whom the program receives HPC SHIFT-Care funding are not also members of the MassHealth CP program – either BH or LTSS.
Tracks 1	Are Tracks 2a and 2b considered one award?	Each Track is a separate application and award, and Applicants considering applying for more than one Track should submit a separate application for each track. There are a total of three application pathways as part of the SHIFT-Care challenge.